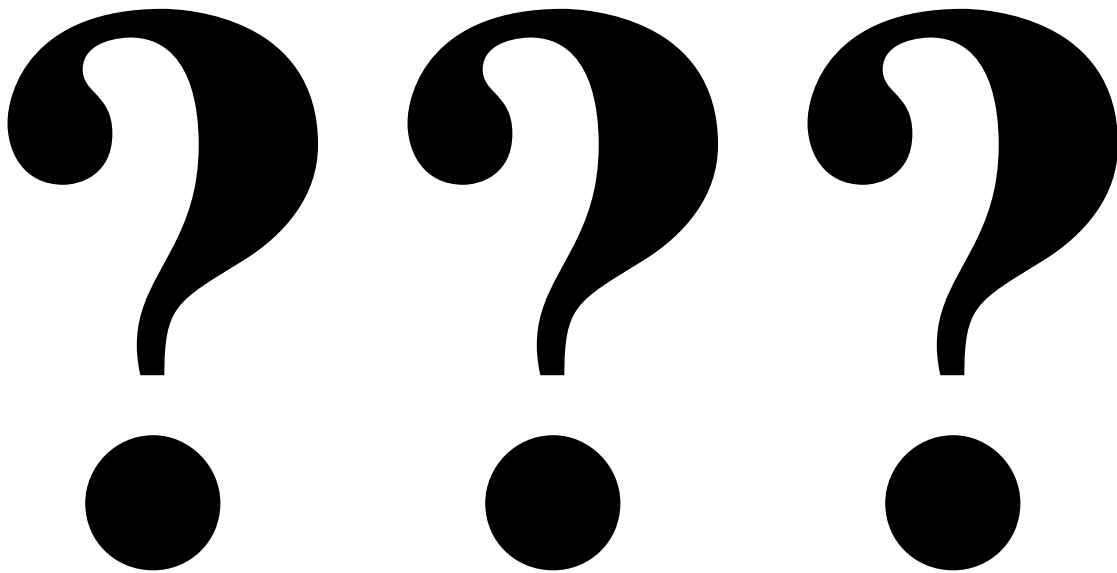


Module 3:
"What Do I Have to Do?"



Agenda

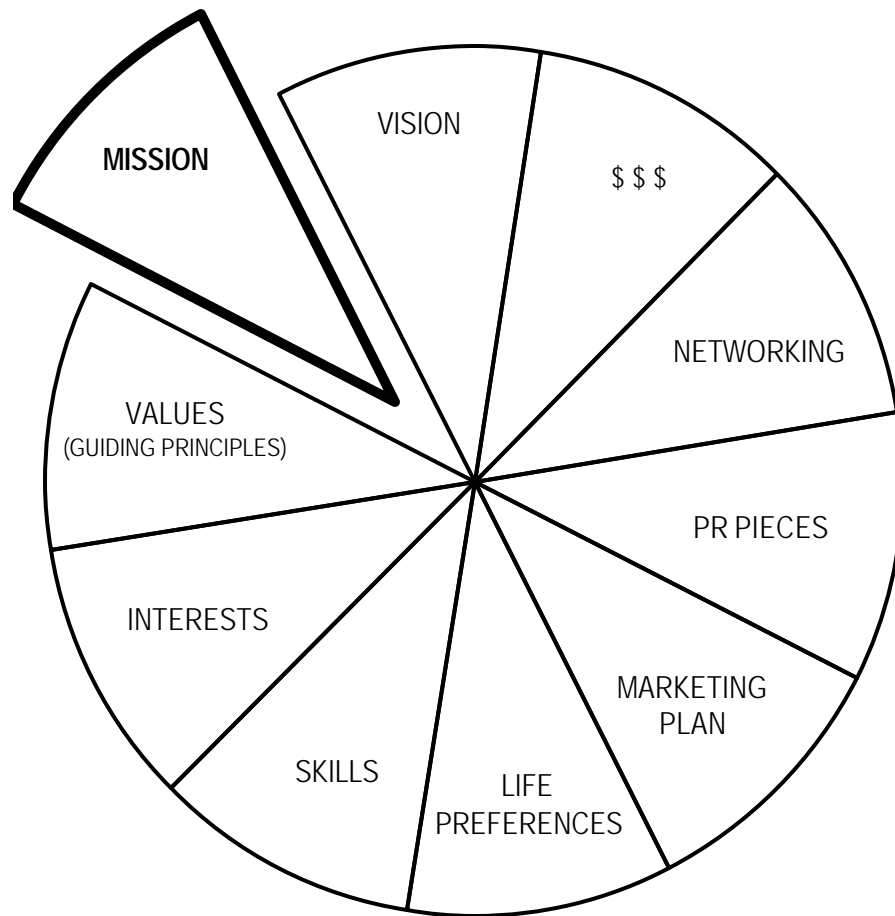
- Introduction
- Opportunities and Challenges
- **Ex:** Opportunities and Challenges
- Education Brief
- Individual Career Life Plan (ICLP)
- **Ex:** My ICLP
- ICLP Resources
- FSC Briefing
- Summary
- Evaluation

Objectives

At the end of this module, you'll be able to:

- Identify opportunities and challenges between your dream and your current situation, through the use of your Dream Sheet and Match.
- Develop an Individual Career Life Plan (ICLP) to assist you in meeting your professional and personal goals.

Career Plan



To achieve success you must have a Career Plan. This section will help you develop your goals into a plan and create concrete steps to achieve your goals. As you follow your plan in the future, be sure to adjust it as new information becomes available and as you alter your goals.

Opportunities and Challenges Worksheet

Opportunities = Factors in our life that will support our change. They may be our education, family, luck, and opportunities.

1) Think of all the factors in your life that support change. Try and identify your:

a) Immediate Opportunities:

b) Long-term Opportunities:

c) How can you fully utilize them?

Opportunities and Challenges Worksheet (continued)

Challenges = Factors that could prevent or slow down our change. They may be our lack of training, family circumstances, outdated ideas, need to become knowledgeable in a new area.

1) Think of all the factors in your life that may slow down or prevent your change. Try and identify your:

a) Immediate Challenges:

b) Long-term Challenges:

c) How could you overcome them?

Individual Career Life Plan

Short Range Plan (within 1 year)

Brief statement describing your short range goal:		Targeted completion date:
Step 1: (knowledge, skill, or ability needed to meet your goal)	Formal Training: (Course title, location, dates)	Alternate Training: (OJT, self-study, correspondence courses)
Step 2: (knowledge, skill, or ability needed to meet your goal)	Formal Training: (Course title, location, dates)	Alternate Training: (OJT, self-study, correspondence courses)
Step 3: (knowledge, skill, or ability needed to meet your goal)	Formal Training: (Course title, location, dates)	Alternate Training: (OJT, self-study, correspondence courses)
Step 4: (knowledge, skill, or ability needed to meet your goal)	Formal Training: (Course title, location, dates)	Alternate Training: (OJT, self-study, correspondence courses)
Measure of progress: (How will I know when I am making progress toward completing my goal?)		
Review dates: (When will I review my progress toward the achievement of my objective?)		
Challenges: (What might interfere with my taking action or achieving my objective, and how can I deal with these challenges?)		
Sources of help: (Who or what will assist me in taking action and achieving my objective?)		
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Individual Career Life Plan

Long Range Plan (5 years)

Brief statement describing your short range goal:		Targeted completion date:
Step 1: (knowledge, skill or ability needed to meet your goal)	Formal Training: (Course title, location, dates)	Alternate Training: (OJT, self-study, correspondence courses)
Step 2: (knowledge, skill or ability needed to meet your goal)	Formal Training: (Course title, location, dates)	Alternate Training: (OJT, self-study, correspondence courses)
Step 3: (knowledge, skill or ability needed to meet your goal)	Formal Training: (Course title, location, dates)	Alternate Training: (OJT, self-study, correspondence courses)
Step 4: (knowledge, skill or ability needed to meet your goal)	Formal Training: (Course title, location, dates)	Alternate Training: (OJT, self-study, correspondence courses)
Measure of progress: (How will I know when I am making progress toward completing my goal?)		
Review dates: (When will I review my progress toward the achievement of my objective?)		
Challenges: (What might interfere with my taking action or achieving my objective, and how can I deal with these challenges?)		
Sources of help: (Who or what will assist me in taking action and achieving my objective?)		
<div style="display: flex; justify-content: space-between; margin-top: 0;"> <div style="width: 45%; text-align: center;"> <hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> Signature/Date </div> <div style="width: 45%; text-align: center;"> <hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> Instructor Signature/Date </div> </div>		

Sample ICLP

Brief statement describing your short range goal: To get a job doing secretarial work.		Targeted completion date: 4 months from now
Step 1: (knowledge, skill or ability needed to meet your goal) Project management	Formal Training: (Course title, location, dates) Project management Skills; Washington, DC, April 14, 19XX	Alternate Training: (OJT, self-study, correspondence courses) Self study, OJT
Step 2: (knowledge, skill or ability needed to meet your goal) Taking minutes	Formal Training: (Course title, location, dates) None	Alternate Training: (OJT, self-study, correspondence courses) Self study
Step 3: (knowledge, skill or ability needed to meet your goal) Filing	Formal Training: (Course title, location, dates) None	Alternate Training: (OJT, self-study, correspondence courses) OJT (at home)
Step 4: (knowledge, skill or ability needed to meet your goal) People skills	Formal Training: (Course title, location, dates) None	Alternate Training: (OJT, self-study, correspondence courses) OJT, self study
Measure of progress: (How will I know when I am making progress toward completing my goal?) Sending out applications		
Review dates: (When will I review my progress toward the achievement of my objective?) Every three weeks		
Challenges: (What might interfere with my taking action or achieving my objective, and how can I deal with these challenges?) Job Transfers due to spouse's career. Complete this task before my spouse is transferred.		
Sources of help: (Who or what will assist me in taking action and achieving my objective?) Encouragement from my spouse, resources at the FSC, talking to others who have been in similar situations.		
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Signature/Date		Instructor Signature/Date

Available Family Service Center Resources

- Information and referral
- Individual, marital, family and group counseling
- Mobilization and deployment support /ombudsman
- Relocation Assistance Program (RAP)
- Outreach/command representative program
- Family Advocacy Program (FAP)
- Exceptional Family Member Program (EFM)
- Spouse Employment Assistance Program (SEAP)
 - Defense Outplacement Referral System (DORS)
- Transition Assistance Management Program (TAMP)
- Personal Financial Management (PFM)
- Volunteer program
- Crisis response support (repatriation)
- New parent support
- Life skills education
- Sexual assault victim intervention

Course Date _____ Instructor(s) _____

We want to provide you with the best possible training. Your reactions to this module will help us improve the training. Please circle one of the following five choices for each question:

SA (Strongly Agree); A (Agree); N (Neutral/Unsure); D (Disagree); or SD (Strongly Disagree).

Meeting Course Objectives:

- | | | | | | |
|---|----|---|---|---|----|
| 1. Identify opportunities and challenges between your dreams and your current situation, through the use of your Dream Sheet and Match. | SA | A | N | D | SD |
| 2. Develop an ICLP to assist you in meeting your professional and personal goals. | SA | A | N | D | SD |

Contents:

- | | | | | | |
|---|----|---|---|---|----|
| 3. The amount of information covered was appropriate for the length of this module. | SA | A | N | D | SD |
| If you answered N, D or SD, was the amount of information covered:
Too much? _____ Too little? _____ | | | | | |
| 4. The learning materials were clear and well organized. | SA | A | N | D | SD |
| 5. The examples used were appropriate for my situation. | SA | A | N | D | SD |

Instructor(s):

- | | | | | | |
|---|----|---|---|---|----|
| 6. The instructor(s) presented information clearly and understandably. | SA | A | N | D | SD |
| 7. The instructor(s) was/were available and responded to my questions and concerns. | SA | A | N | D | SD |

Course Administration:

- | | | | | | |
|---|----|---|---|---|----|
| 8. The length of the module was appropriate. | SA | A | N | D | SD |
| If you answered N, D or SD, was the module:
Too long? _____ Too short? _____ | | | | | |
| 9. The classroom was comfortable. | SA | A | N | D | SD |
| 10. Breaks were adequate and well spaced. | SA | A | N | D | SD |

Overall:

- | | | | | | |
|---|----|---|---|---|----|
| 11. There was a good balance between exercises and lecture. | SA | A | N | D | SD |
| 12. I feel that I understand the ideas underlying the content we covered. | SA | A | N | D | SD |
| 13. How did you hear about this course? | | | | | |

Comments: (Use back if necessary)

